

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

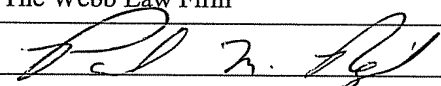
Application Number	10/686,697
Filing Date	10/16/2003
First Named Inventor	Paul A. Kohl
Art Unit	1795
Examiner Name	Sin J. Lee
Total Number of Pages in This Submission	14
Attorney Docket Number	5219 - 061243

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Request for Continued Examination (RCE)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Reply to Missing Parts Under 37 CFR 1.52 or 1.53		

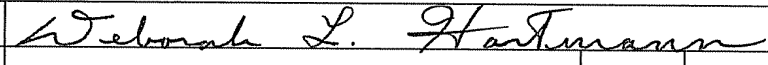
The Commissioner for Patents is hereby authorized to charge any additional fees or underpayment of fees under 37 CFR 1.16 and 1.17 to Deposit Account No. 23-0650.

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	The Webb Law Firm		
Signature			
Printed Name	Paul M. Reznick		
Date	July 18, 2008	Reg. No.	33059

## CERTIFICATE OF TRANSMISSION / MAILING

I hereby certify that this correspondence is being electronically transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Deborah L. Hartmann	Date	July 18, 2008

# FEE TRANSMITTAL

## For FY 2008

Complete if Known

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1,270

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Filing Date 10/16/2003  
First Named Inventor Paul A. Kohl  
Examiner Name Sin J. Lee  
Art Unit 1795  
Attorney Docket 5219 - 061243

### METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_  
☒ Deposit Account Deposit Account Number: 23-0650 Deposit Account Name: \_\_\_\_\_

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

### FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	310	75	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

#### 2. EXCESS CLAIM FEES

Fee Description	Small Entity	Fee (\$)	Fee Paid (\$)
Each claim over 20 (including Reissues)	50	25	
Each independent claim over 3 (including Reissues)	210	105	
Multiple dependent claims	370	185	
<u>Total Claims</u> - 20 or HP = <u>Extra Claims</u> x <u>Fee (\$)</u> = <u>Fee Paid (\$)</u>			
8 - 27 = 0 x 0 = 0			
HP = highest number of total claims paid for, if greater than 20.			
<u>Indep. Claims</u> - 3 or HP = <u>Extra Claims</u> x <u>Fee (\$)</u> = <u>Fee Paid (\$)</u>			
2 - 4 = 0 x 0 = 0			
HP = highest number of independent claims paid for, if greater than 3.			

#### 3. APPLICATION SIZE FEE

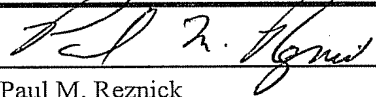
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets - 100 = Extra Sheets / 50 = Number of each additional 50 or fraction thereof (round up to a whole number) x Fee (\$) = Fee Paid (\$)

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)  
Other (e.g., late filing surcharge): Petition for Extension of Time Fee (2 months) & RCE Fee \$460 & \$810

#### SUBMITTED BY

Signature  Registration No. (Attorney/Agent) 33,059 Telephone 412-471-8815  
Name (Print/Type) Paul M. Reznick Date July 18, 2008